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SERIAL NUMBER 10/695,068	FILING OR 371(c) DATE 10/28/2003 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 4002-3432
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/421,701 10/28/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 01/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TN	SHEETS DRAWING 15	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 4
35 USC-119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

ADDRESS

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TITLE

Multi-axial, cross-link connector system for spinal implants

FILING FEE RECEIVED 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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